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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WKH NORMANDY WOODS, LCC P Name of Florida Limited Partnership or Limited Liability Limited Partnership
The enclosed Certificate of Revocation of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
JAY Meder Contact Person
WZH INTOME Propositions, let
100 3 sel Street S. Suite 300 Address
City, State and Zip Code
City, State and Zip Code JMeder Wwsh realty. www. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
For further information concerning this matter, please call:
Name of Contact Person at (727) 892-38065. Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status S105.00 Filing Fee Certified Copy and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

CERTIFICATE OF REVOCATION OF DISSOLUTION FOR

WR4 Necounty	artnership or Limited Liability Limited Partnership
Pursuant to the provisions of section	n 620.1812, Florida Statutes, this Florida limited ed partnership hereby submits this Certificate of
	ertificate of dissolution being revoked is:
	May 12, 2017
	dution was authorized in the same manner as the
THIRD: The revocation of dissolut	77
- April 25, 2017	2017 T
FOURTH: Attached is a copy of the	ne certificate of dissolution.
Note: If the date inserted in this block does	n the date of filing: Jeene 30, 2027 than 90 days after the date this document is filed with a Fixed a not meet the applicable statutory filing requirements, this date to date on the Department of State's records.
Signatures of each general partner of s. 620.4803(3) or (4), F.S.:	
1 1 M	Janich Kallelye
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$ 8.75

ÇERTIFICATE OF DISSOLUTION FOR

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 3/31/2005
All property owned by the partnership, an apartment complex, was sold. The partnership no longer has assets or any operations, SECOND: A Notice of Dissolution is attached. (Check box if attached.) THIRD: Effective date, if other than the date of filing: May 15, 2017 (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
SECOND: A Notice of Dissolution is attached. (Check box if attached.) THIRD: Effective date, if other than the date of filing: May 15, 2017 (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
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(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
Signatures of each general partner or the person appointed pursuant to
s. 620.1803(3) or (4), F.S.:
Jay Meder Jay Meder J. Mark Rulldge
Filing Fee: \$52.50
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75